## **QUICKFUND\$ FOR EDUCATORS FORM 7**

All applicants should read the guideline instructions to correctly complete this application. Neatly handwrite or type in 12-point. Fill in all questions and fields. Answer any required narrative questions and complete the checklist on page 51.

Applicant Name			
Street Address Stat	P.O.	Box	
City Stat	e Zip	County	
Phone Day  Fax E-m  new address or □ phone number.	Evening		Cell
FaxE-m	nail		
I am a ☐ teacher/educator ☐ admining the following discipline (see Glossary		nal/folk artist ☐ ICA	teaching artist applying
<ul><li>□ Visual Arts - discipline</li><li>□ Design - discipline</li><li>□ Media Arts - discipline</li></ul>			
☐ Performing Arts ☐ Theater ☐D ☐ Literature ☐ Fiction	ance □Choreogra □ Creative Nonf	phy □Music □Othe	r
Grant Program ☐ QuickFund\$ Amoun	nt Requested \$		
☐ Teacher Incentive	Start Date	End Da	ite
Professional Development	Start Date	End Da	nte
(Projects cannot begin until 3 weeks o	ıfter deadline.)		
Citizenship:  U.S. Citizen  Legar How long have you been a resident of Ion If you are currently enrolled in a degree	laho? (Residency requiren	nent of at least one year pr	ior to making application.)
(Degree seeking students m			
QuickFund\$ applicants write a one-sen opportunity in the space below.	tence description o	f this project, activity, or	professional development
If you have received a grant or award, d	id you submit the	required final report?	□ yes □ no
Authorizing Signatures - I certify that the informati true and correct to the best of my knowledge. I l			
Applicant Signature			Date